

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	T.A	JC 844	07/24/01
RESPONSE FORMALITY REVIEW	AM	917	10-23-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	02/03/01
2	02/03/01
3	02/03/01
4	02/03/01
5	02/03/01
6	02/03/01
7	02/03/01
8	02/03/01
9	02/03/01
10	02/03/01
11	02/03/01
12	02/03/01
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44	02/03/01
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47	02/03/01
48	02/03/01
49	02/03/01
50	02/03/01

Claim	Date
Final	
Original	
51	02/03/01
52	02/03/01
53	02/03/01
54	02/03/01
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96	02/03/01
97	02/03/01
98	02/03/01
99	02/03/01
100	02/03/01

Claim	Date
Final	
Original	
101	02/03/01
102	02/03/01
103	02/03/01
104	02/03/01
105	02/03/01
106	02/03/01
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108	02/03/01
109	02/03/01
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147	02/03/01
148	02/03/01
149	02/03/01
150	02/03/01

If more than 150 claims or 10 actions  
staple additional sheet here

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48  
 10 23 01  
 530  
 02/24/01